

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010309

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: THE VILLAS AT CARROLLWOOD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3939 EHRLICH RD  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

3939 EHRLICH RD  
TAMPA, FL 33624

**New Mailing Address:**

FEI Number: 20-1834334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZOM RESIDENTIAL SERVICES INC  
1950 SUMMIT PARK DR SUITE 300  
ORLANDO, FL 32810 US

**Name and Address of New Registered Agent:**

CLAYTON & MCCULLOH LAW FIRM  
1065 MAITLAND CTR COMMONS BLVD  
MAITLAND, FL 32751 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHAWN FANCIL

04/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S/T ( ) Delete  
Name: MACALUSO, ANTOINETTE  
Address: 4008 BANGALOW PALM CT  
City-St-Zip: TAMPA, FL 33624

Title: P ( ) Delete  
Name: MONTANO, MARK  
Address: 17302 TOBACCO RD  
City-St-Zip: LUTZ, FL 33558

Title: VP ( ) Delete  
Name: MILLER, DONNA  
Address: 4004 MAJESTY PALM COURT  
City-St-Zip: TAMPA, FL 33624

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: MACALUSO, ANTOINETTE  
Address: 4008 BANGALOW PALM CT  
City-St-Zip: TAMPA, FL 33624

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S/T (X) Change ( ) Addition  
Name: MILLER, DONNA  
Address: 4004 MAJESTY PALM COURT  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAWN FANCIL

CAM

04/02/2009

Electronic Signature of Signing Officer or Director

Date